

New Jersey Department of Health and Senior Services
INSPECTION REPORT OF KENNELS, PET SHOPS, SHELTERS AND POUNDS

Establishment Trading Name		Establishment License No.		Date	
Signature of Inspecting Official		Municipality		Time Began (2400 hours)	
Type of Establishment <input type="checkbox"/> Kennel <input type="checkbox"/> Pound <input type="checkbox"/> Pet Shop <input type="checkbox"/> Shelter		Type of Inspection <input type="checkbox"/> Initial <input type="checkbox"/> Complaint <input type="checkbox"/> Routine <input type="checkbox"/> Reinspection		Result of Inspection <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Conditional	
This inspection is based on "Rules and Regulations Governing the Operation and Maintenance of Kennels, Pet Shops, Shelters and Pounds" promulgated under the authority of N.J.S.A. 4:19-15.14, ("X" indicates violation.)					
N.J.A.C. 8:23A 1.2 - COMPLIANCE <input type="checkbox"/> b. Certificate of local inspection not displayed <input type="checkbox"/> d. No certificate of annual fire inspection 1.3 - FACILITIES (GENERAL) <input type="checkbox"/> a. Housing unsound or in poor repair <input type="checkbox"/> a. Location or layout creates a nuisance <input type="checkbox"/> b. Potable water not available <input type="checkbox"/> b. Water test results not available <input type="checkbox"/> c. Food and/or bedding unprotected <input type="checkbox"/> c. Perishable food unrefrigerated <input type="checkbox"/> d. Solid waste disposed of improperly <input type="checkbox"/> e. No facilities for caretaker's cleanliness <input type="checkbox"/> f. Buildings and grounds dirty or hazardous <input type="checkbox"/> f. Insects and/or rodents uncontrolled 1.4 - FACILITIES (INDOOR) <input type="checkbox"/> a. Indoor animal facilities not provided <input type="checkbox"/> b. Insufficient heat provided <input type="checkbox"/> c. Ventilation is inadequate <input type="checkbox"/> d&e. Improperly lighted <input type="checkbox"/> f. Interior surfaces dirty or porous <input type="checkbox"/> g. Unsatisfactory floor drainage 1.5- FACILITIES (OUTDOOR) <input type="checkbox"/> a. Animals not protected from sun <input type="checkbox"/> b. No shelter from rain and/or snow <input type="checkbox"/> c. Inadequate shelter <input type="checkbox"/> d. Inadequate drainage <input type="checkbox"/> e. Surfaces not impervious to moisture (Except breeding kennels) 1.6- PRIMARY ENCLOSURES <input type="checkbox"/> a. <input type="checkbox"/> 1. Not escape-proof <input type="checkbox"/> 2. Unsafe <input type="checkbox"/> 3. Do not exclude predators <input type="checkbox"/> 4. Dirty or wet <input type="checkbox"/> b. Insufficient space for comfort <input type="checkbox"/> c. Improper segregation of animals <input type="checkbox"/> j. Animals tied 1.7- FEEDING AND WATERING <input type="checkbox"/> a&c. Feeding frequency inadequate <input type="checkbox"/> b. Food quality inadequate for adults <input type="checkbox"/> c. Food quality inadequate for young <input type="checkbox"/> d. Food inaccessible <input type="checkbox"/> e,f&g. Feeders or pans dirty <input type="checkbox"/> h. Water not accessible to animals at all times			N.J.A.C. 8:23A SECTIONS (CONTINUED) 1.8 - SANITATION <input type="checkbox"/> a. Animals not protected during cleaning operation <input type="checkbox"/> b. Enclosures dirty <input type="checkbox"/> c. Enclosures improperly sanitized 1.9 - DISEASE CONTROL <input type="checkbox"/> a. Inadequate veterinary supervision Supervising Vet: <input type="checkbox"/> b. Improper handling of injured animals <input type="checkbox"/> c. Improper quarantine or segregation of sick animals <input type="checkbox"/> h. Improper handling of rabies suspects 1.10 - HOLDING & RECLAIMING ANIMALS <input type="checkbox"/> a. <input type="checkbox"/> 1. Stray dogs and cats not held for 7 days <input type="checkbox"/> 2,3,4&5. Biting animals improperly handled <input type="checkbox"/> 6. Biting record of animals destroyed <input type="checkbox"/> b. <input type="checkbox"/> 1&2. Inadequate sign <input type="checkbox"/> 3,4,5,6&7. Unreasonable requirements set for claiming impounded animals 1.11 - EUTHANASIA <input type="checkbox"/> a&b. Euthanasia improperly performed <input type="checkbox"/> c&d. Method for euthanasia not acceptable Method used: Trained by: 1.12 - TRANSPORTATION <input type="checkbox"/> a&b. Vehicle faulty: Plate No. <input type="checkbox"/> c. Primary enclosures inadequate <input type="checkbox"/> c. No supplemental heat or air conditioning <input type="checkbox"/> d. Incompatible grouping <input type="checkbox"/> e. Insufficient space <input type="checkbox"/> f&g. Enclosures dirty <input type="checkbox"/> h. Veterinary care not provided <input type="checkbox"/> i. Animals held more than 24 hours during transport 1.13 - RECORDS AND ADMINISTRATION <input type="checkbox"/> a. Records not complete <input type="checkbox"/> b,c&d. Records not kept on premises <input type="checkbox"/> e. Status of establishment changed since notice NJAC 8:23-1 THROUGH 3 <input type="checkbox"/> Dogs are imported without legal health certificate <input type="checkbox"/> Birds under quarantine moved without permission <input type="checkbox"/> Psittacine records are inadequate <input type="checkbox"/> Turtles without salmonella warranty offered for sale or distribution <input type="checkbox"/> Improper transportation of animals		
LIST SPECIES AND NUMBER OF ANIMALS ON HAND					
SPECIES	NO.	SPECIES	NO.	SPECIES	NO.
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
Signature of Owner, Operator or Representative			Title		